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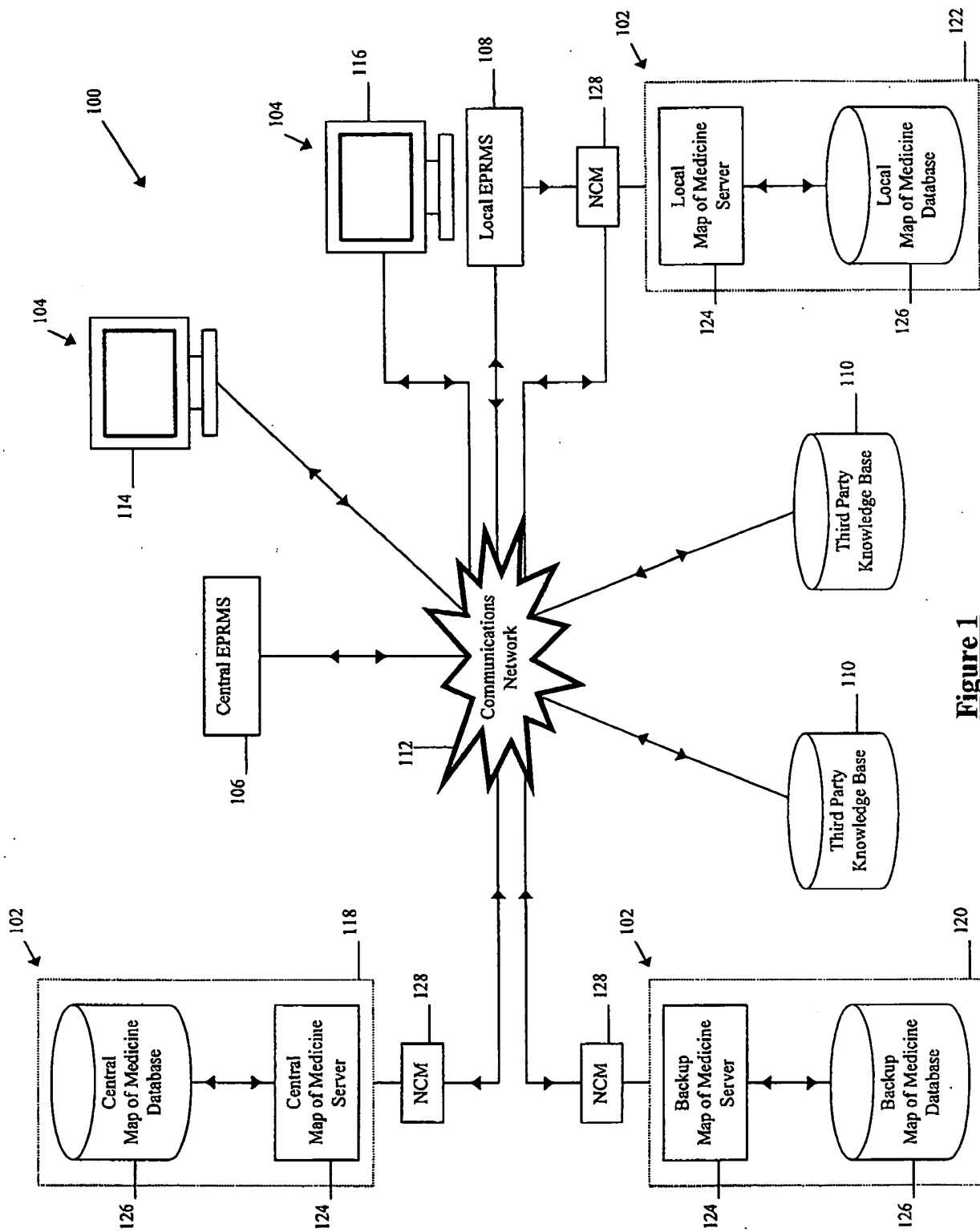


Figure 1

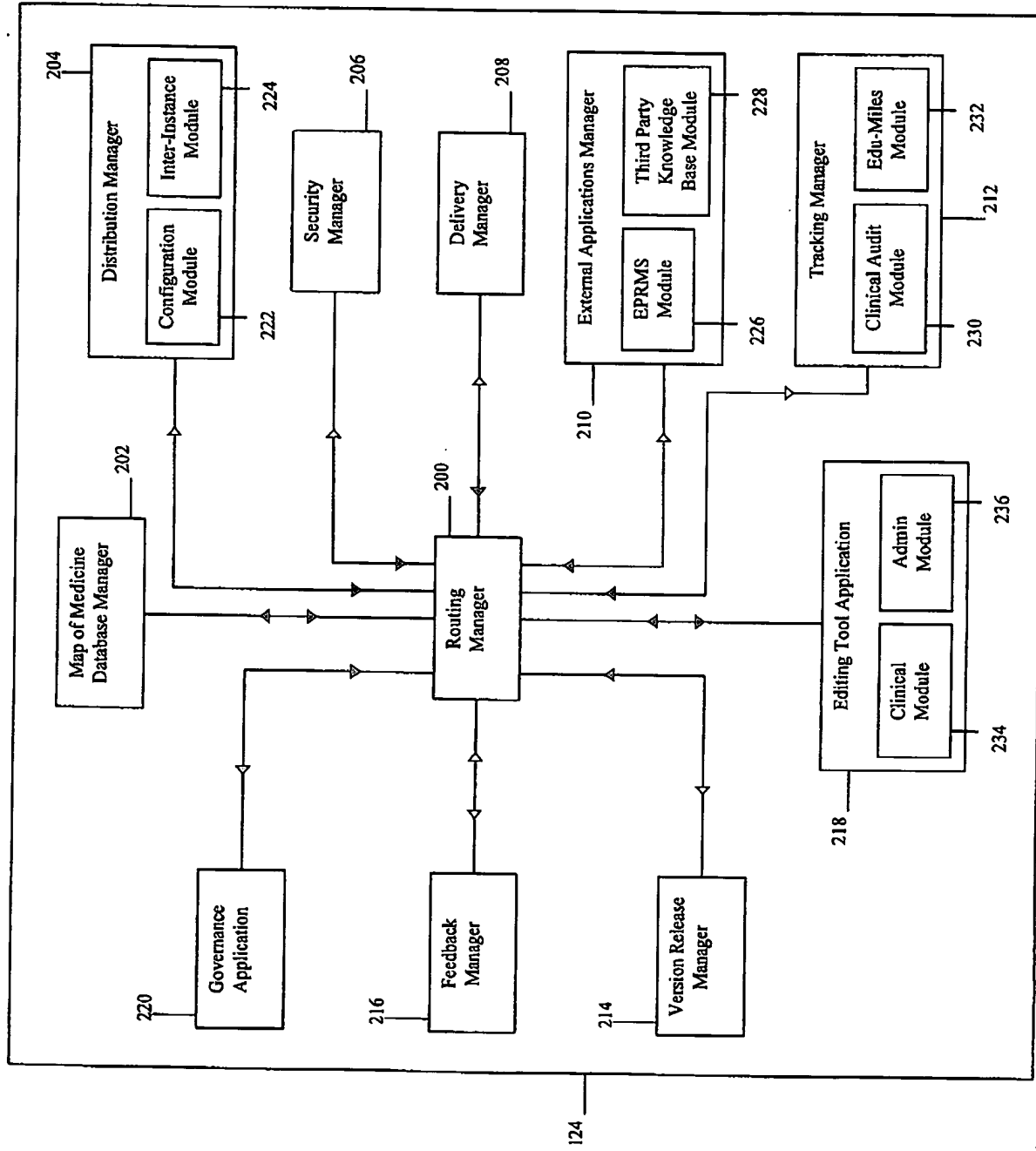


Figure 2

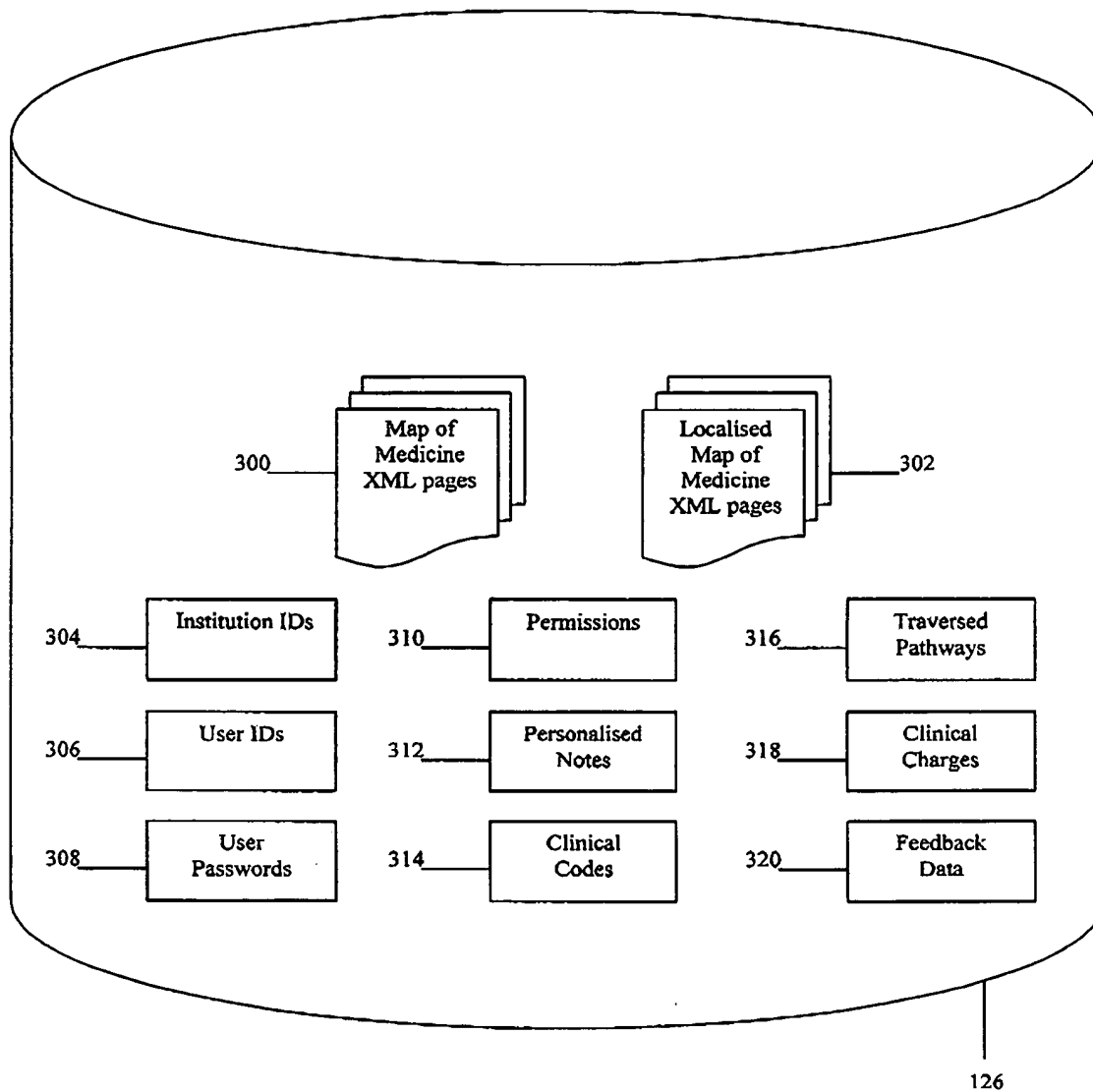


Figure 3

4

In all the following EPRMS pages information would be shown in this area including: identifying the patient and providing navigation and action functionality relating to the EPR (eg, to other views of the EPR data).

402

404

406

1. Enter problem

408

Suspected colorectal cancer

2. Select protocol

410

Recommended

Suspected colorectal cancer

Alternatives

412

Colon cancer

Rectal cancer

414

NEXT

Figure 4a

402

In all the following EPRMS pages information would be shown in this area including: identifying the patient and providing navigation and action functionality relating to the EPR (eg, to other views of the EPR data).

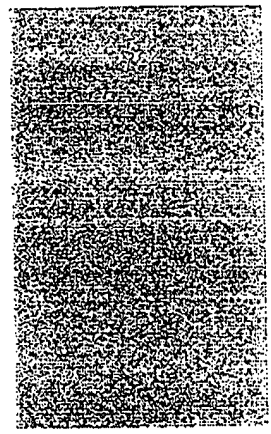
404

406

408

1. Enter problem

Suspected colorectal cancer



406

2. Select protocol

410

Recommended

Suspected colorectal cancer

Alternatives

412

Colon cancer
Rectal cancer

412

NEXT

Figure 4a

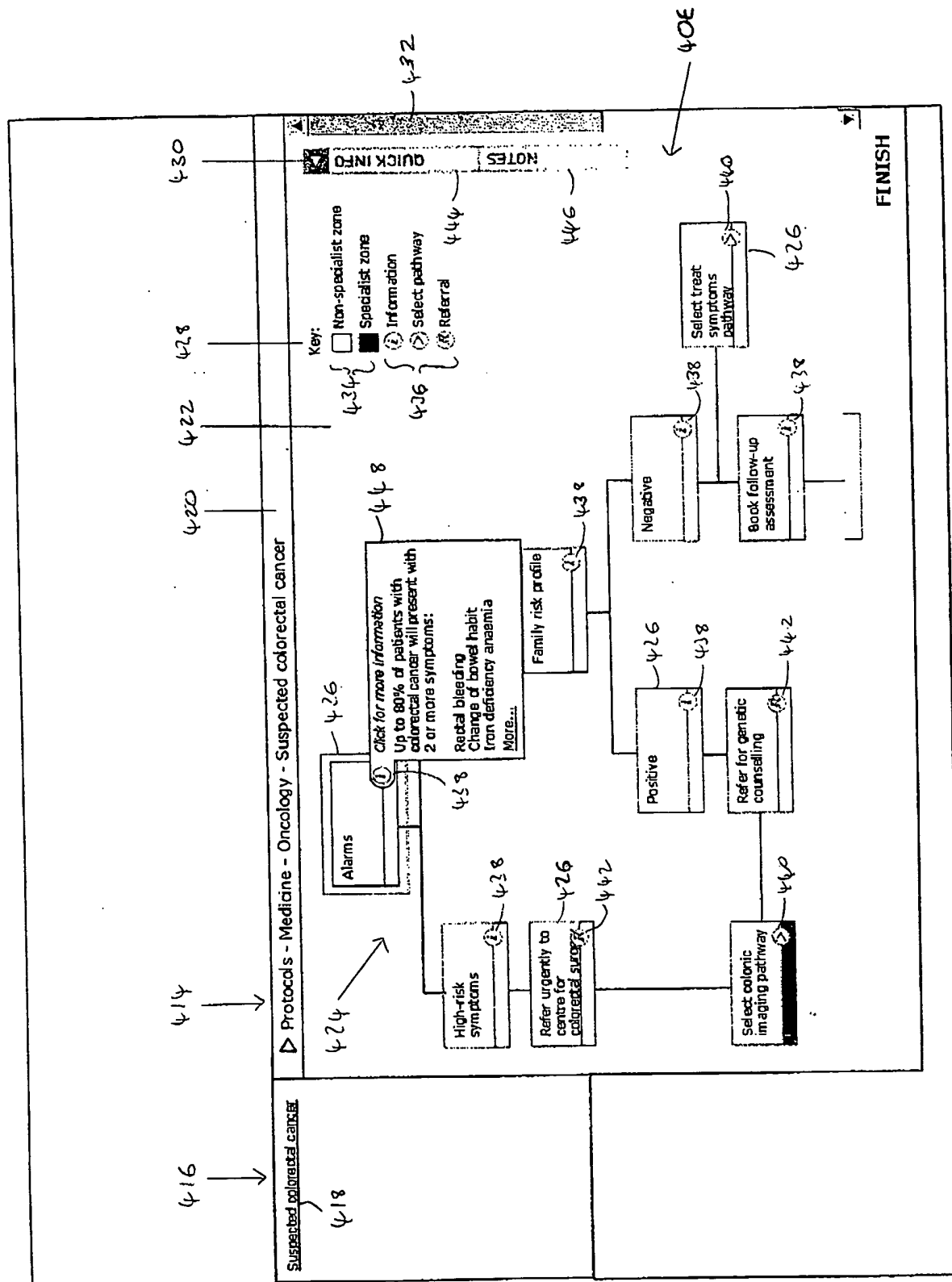
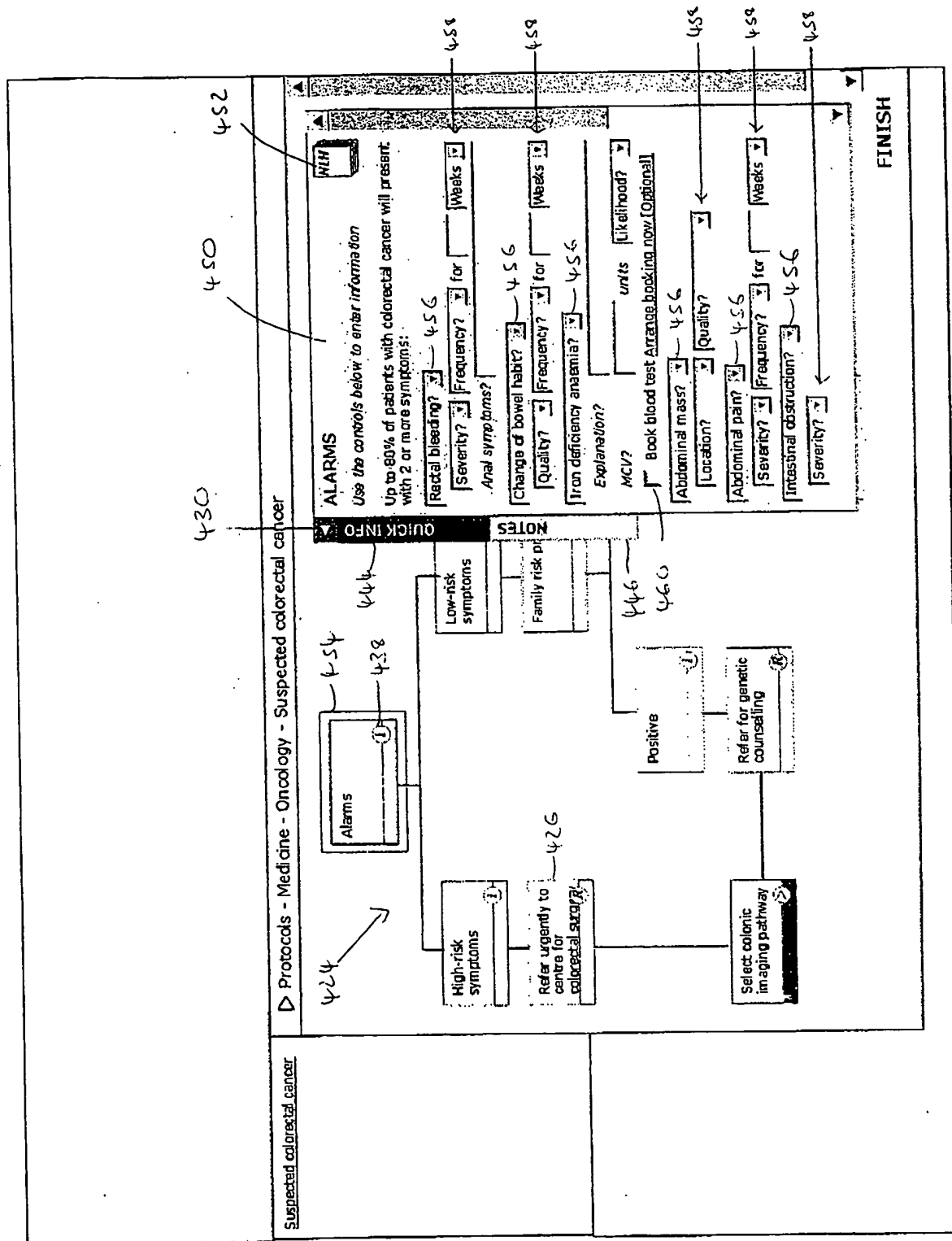


Figure 4b



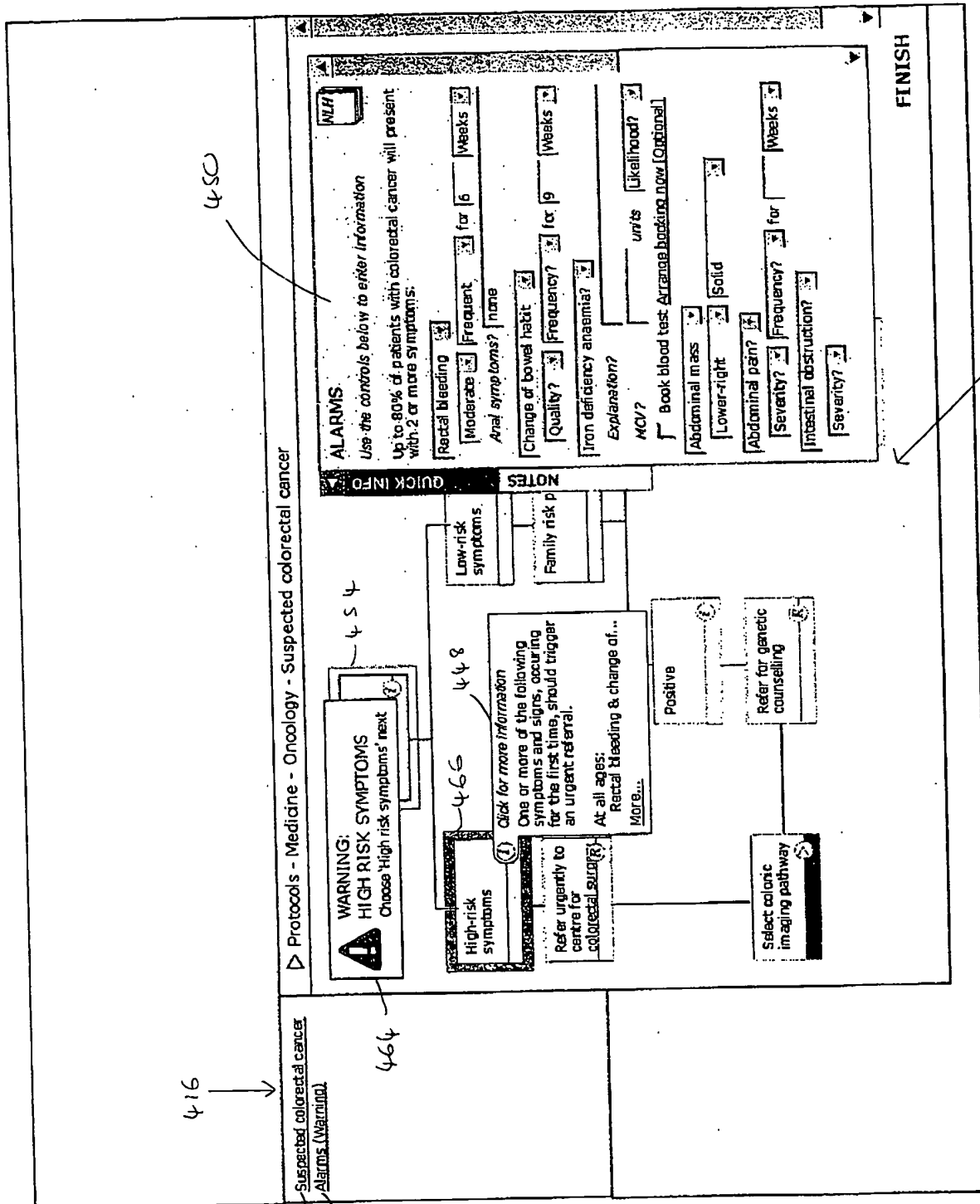


Figure 4d

416

Suspected colorectal cancer
Alarms (Warning)

430

Protocols - Medicine - Oncology - Suspected colorectal cancer

424

Alarms

466

High-risk symptoms

462

Refer urgently to centre for colorectal surgery

442

Low-risk symptoms

Family risk profile

Positive

Refer for genetic counselling

Select colonic imaging pathway

QUICK INFO

HIGH RISK SYMPTOMS
Check the boxes which match your observations
One or more of the following symptoms and signs, occurring for the first time, should trigger an urgent referral.

At all ages:

☒ Rectal bleeding & change of bowel habit (looser stools and/or increased frequency) present for at least 6 weeks

Rectal bleeding: Moderate Frequent for 6 Weeks

Anal symptoms? none

Change of bowel habit: Quality? Frequency? for 9 Weeks

☐ Abdominal pain & change of bowel habit

Abdominal pain? Severity? Frequency? for Weeks

Change of bowel habit: Quality? Frequency? for 9 Weeks

☒ Readily palpable right iliac fossa mass?

Abdominal mass

FINISH

Figure 4e

416

↓

414

↓

470

↓

Suspected colorectal cancer
Alarms (Warning)
Referral to centre for colorectal cancer (Urgent)

Referral to centre for colorectal cancer

Patient details

Last name First name [More info...](#)

Referring doctor

Last name First name Title [More info...](#)

Referring to

Practice / dept. [More info...](#)

Centre Current waiting list: 4 weeks

Dept. 472

To [More info...](#)

Medical context

Reason for referral Priority

Additional information 406

Referral information

Rectal bleeding for weeks Anal symptoms?

Change of bowel habit for weeks

FINISH

Figure 4f

Homepage (R1p)

medic-to-medic

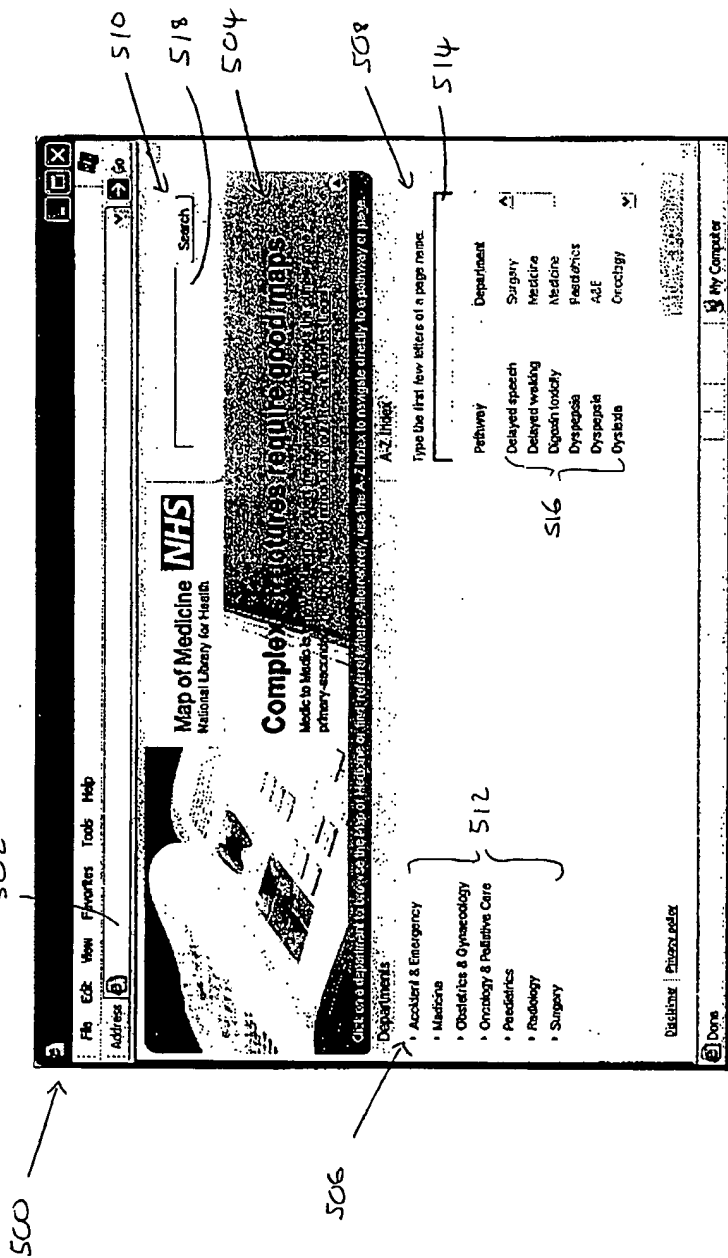


Figure 5a

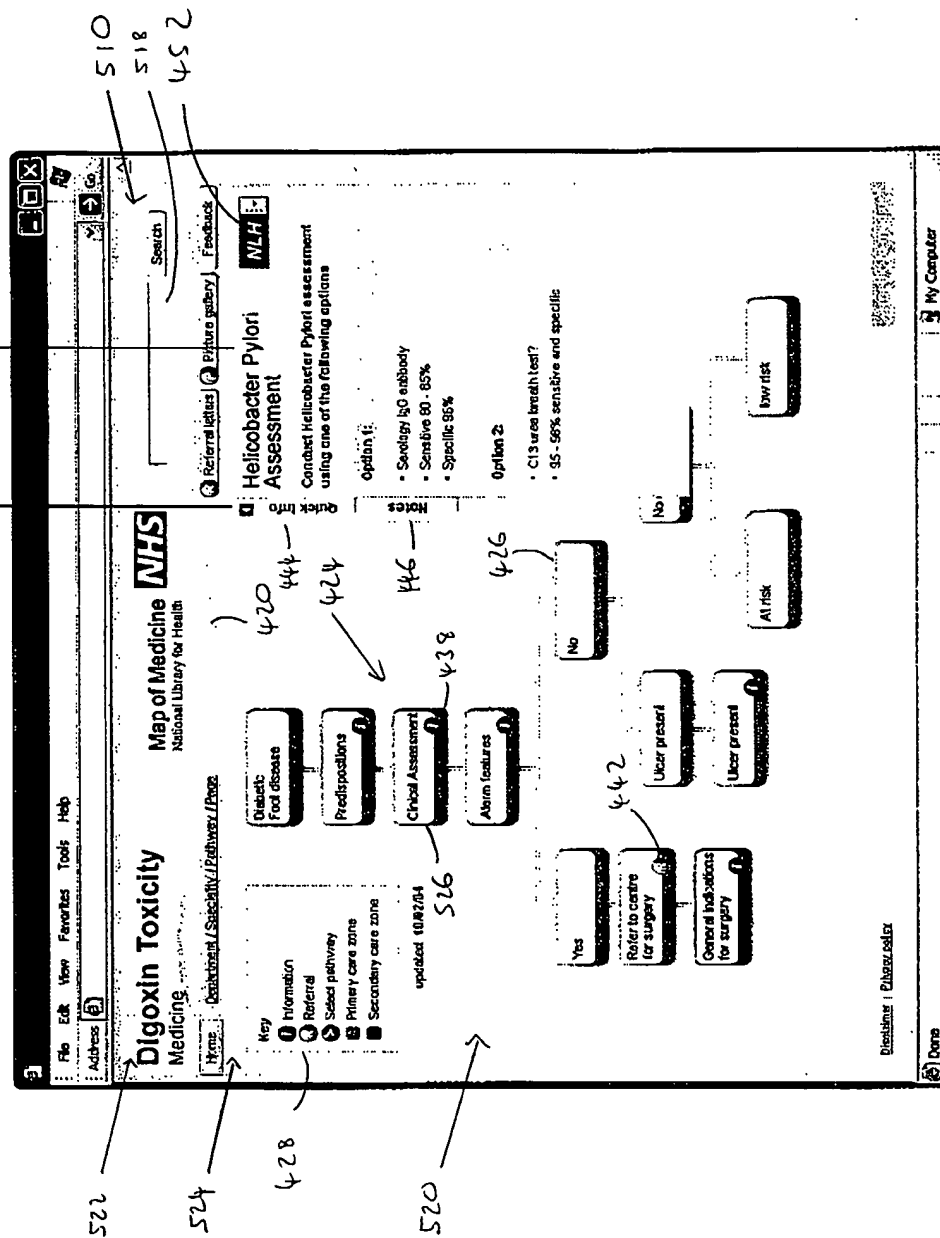


Figure 5b



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NeLH knowledge search (3)

430

450

Helicobacter Pylori Assessment



Conduct Helicobacter Pylori assessment using one of the following options

Option 1:

- Serology IgG antibody
- Sensitive 80 - 85%
- Specific 96%

Option 2:

- C13 urea breath test?
- 95 - 98% sensitive and specific

medic-to-medic

S36

Search results

TIP: Roll-over the NLH icon to search again [Refine Search](#)

You searched for: **Helicobacter Pylori Assessment**

Guidance	Evidence	Reference	Patient
----------	----------	-----------	---------

Title text of item



Standfirst or introduction for this item, usually a couple of pithy sentences explaining what the item is about.

Context / context / context / context

Match: 78% Updated: 21-03-04

S38

Title text of item



Standfirst or introduction for this item, usually a couple of pithy sentences explaining what the item is about.

Context / context / context / context

Match: 78% Updated: 21-03-04

S38

Title text of item



Standfirst or introduction for this item, usually a couple of pithy sentences explaining what the item is about.

Match: 78% Updated: 21-03-04

S38

Sort results by:

[My search options](#)

Figure Sd

704

Speciality: Accident and Emergency

Sub-specialty: A & E Resuscitation

706

Pathway: Select pathway

Select pathway

Adult advanced life support (x182)

Adult basic life support (x183)

Adult choking (x184)

Head injury (x185)

Peri arrest - Atrial fibrillation (x186)

Peri arrest - Bradycardia (x187)

Peri arrest - Broad complex tachycardia (x188)

Peri arrest - Narrow complex tachycardia (x189)

Adult anaphylactic reaction (x190)

708

702

medic 100 medic

Figure 7a

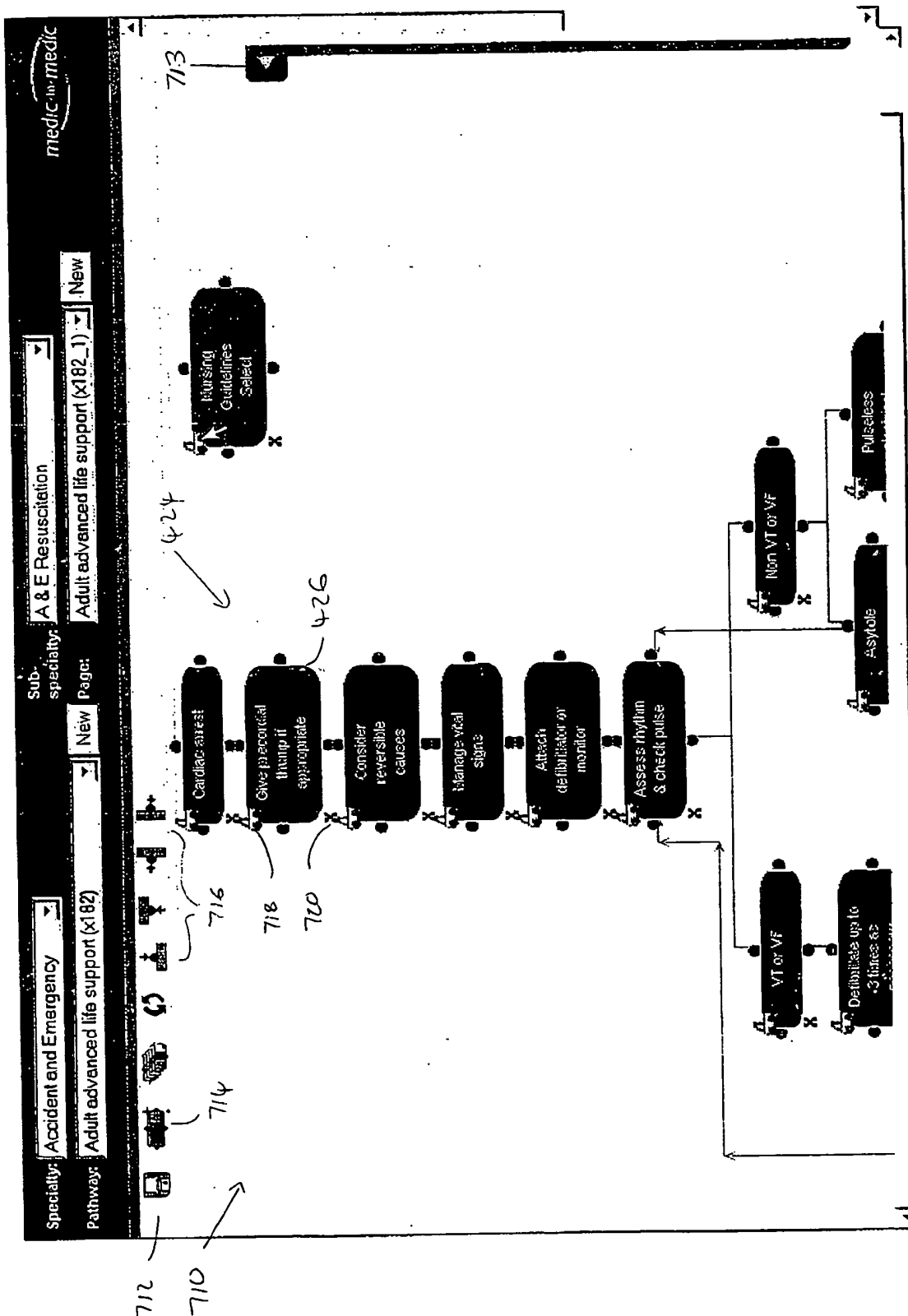


Figure 7b

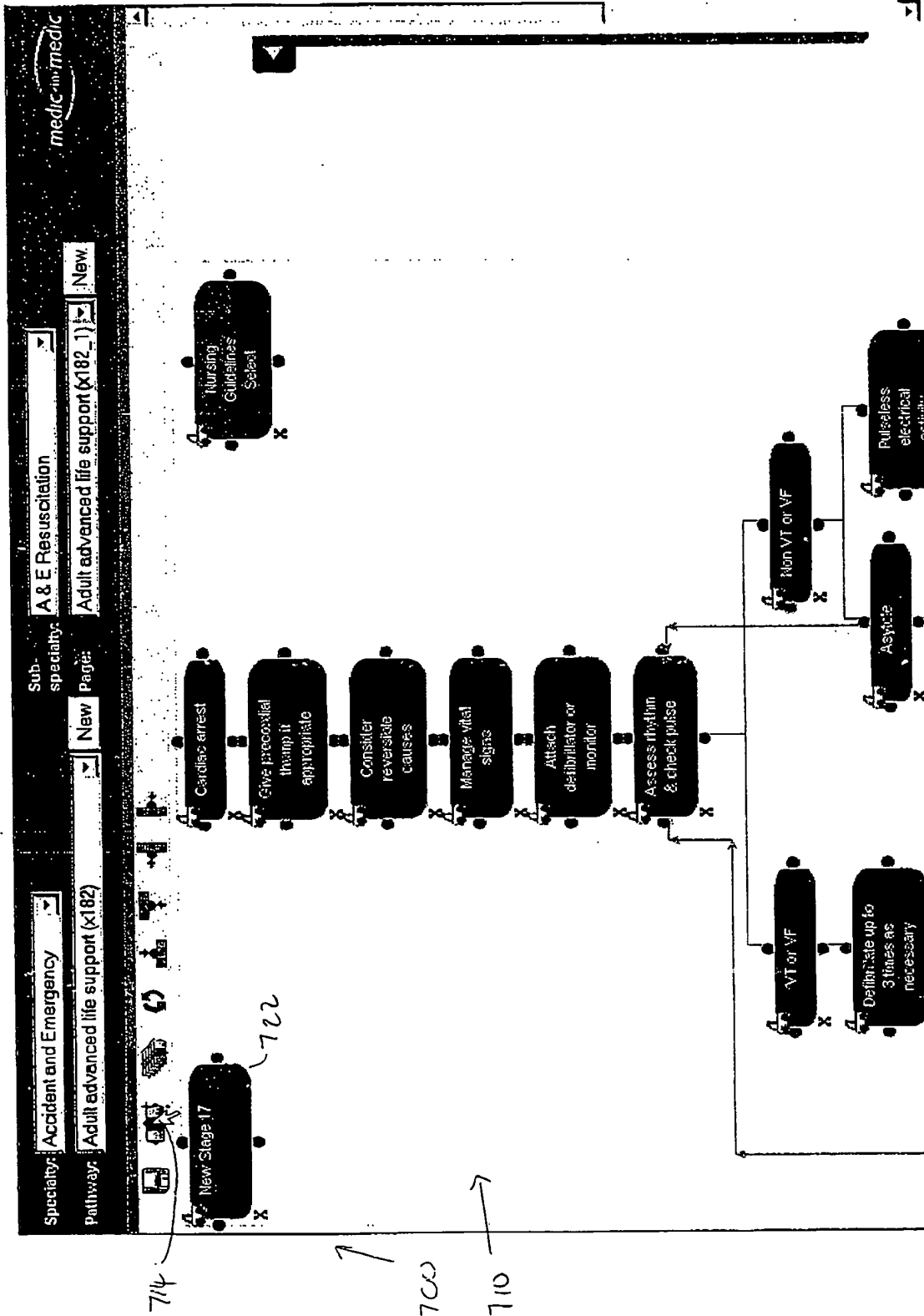


Figure 7c

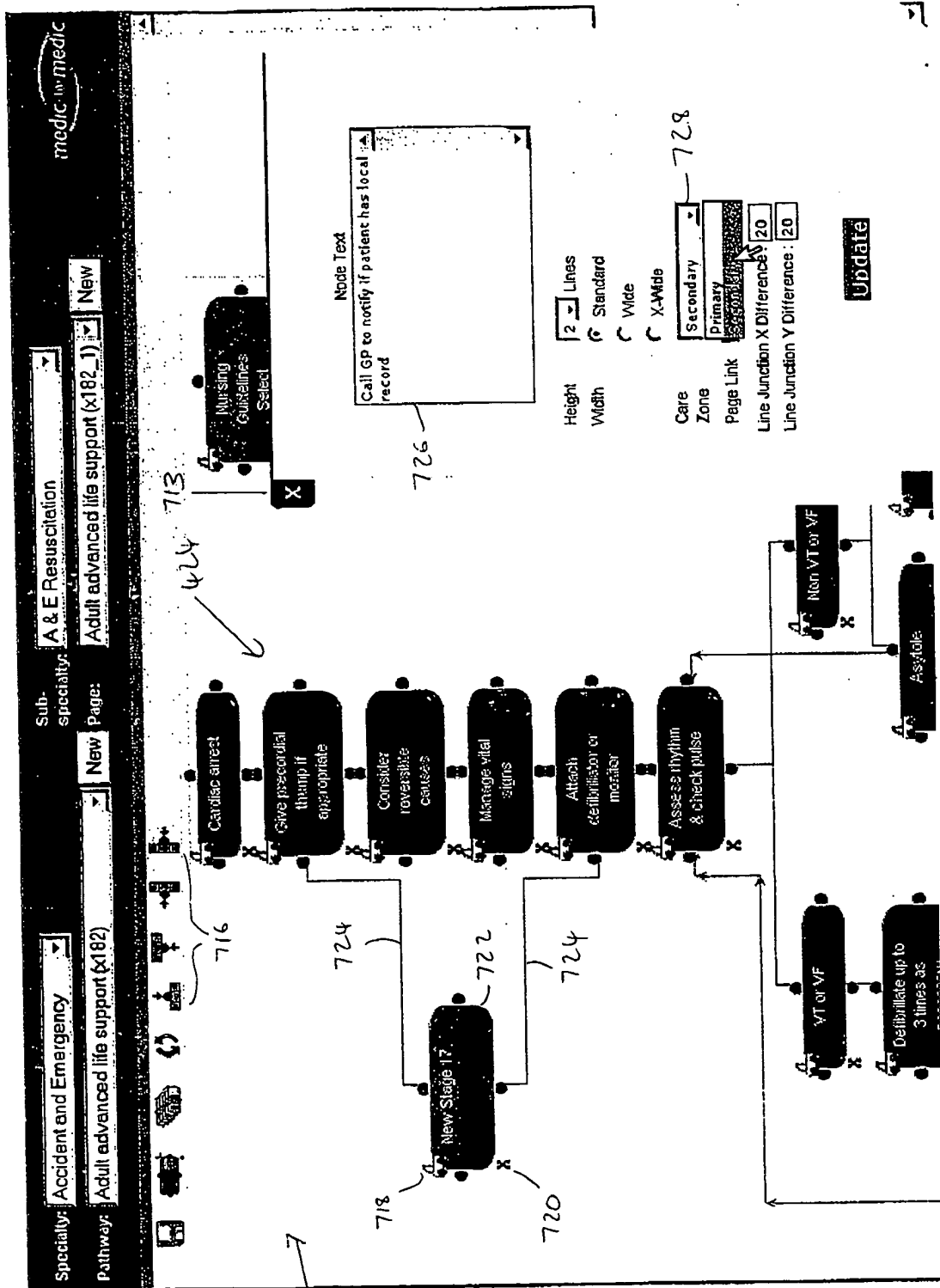


Figure 7d

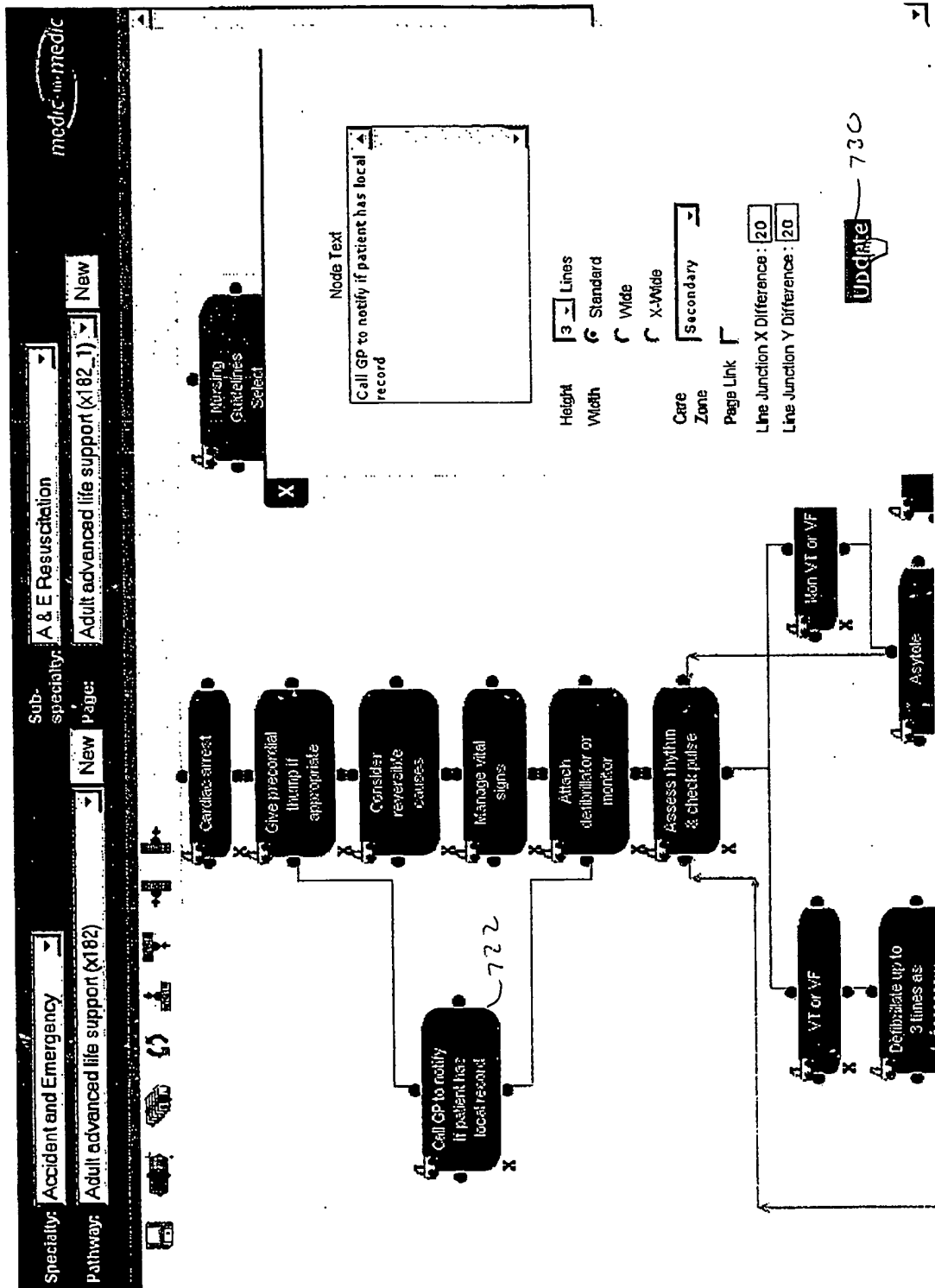


Figure 7e

Specialty: Accident and Emergency

Sub-specialty: A & E Resuscitation

Pathways: Adult advanced life support (x182_1)

Pages: Adult advanced life support (x182_1)

medic

medic

Current Node: Further considerations during CPR (1) | Page Link: None | Referral: Update

Long Info

Short Info

Admin Guidance

Adult advanced life support (x182_1)

Further considerations during CPR (1)*

CPR for 3 minutes (1)

minimize if immediately after defibrillation (2)*

Pulseless electrical activity (3)*

Astoria (4)*

Further considerations during CPR (5)*

CPR for 1 minute (6)

Defibrillate up to 3 times as necessary (7)*

Non VF or VF (8)

VF or VF (9)

Assess rhythm & check pulse (10)

Attach defibrillator or monitor (11)

Manage vital signs (12)

Give precordial thump if

Edit Page

Save

Preview Saved Version

822

Admin Guidance

Call 020 4569583 xtn. 345 for mortuary assistance

828

Long Info

Get expert help

Correct reversible causes

codes for point 1:

SNOMED CT 373348000, SNOMED CT 314981002

End Group 1:

Add New Point | Del

Group 2:

Add New Point | Del

If not already done:

point 1:

Del

check electrodes, paddle positions and contact

attempt or verify:

airway and oxygen saturation

intravenous access

give epinephrine every three minutes:

1 mg intravenously or 2-3 mg via the tracheal tube

epinephrine given by the tracheal route should be diluted to at least 10 ml with sterile water

considerations:

amiodarone 300 mg (max)

amiodarone 300 mg (max)

Figure 8d.

Specialty: Accident and Emergency

Sub-specialty: A & E Resuscitation

Pathway: Adult advanced life support (x182)

Page: Adult advanced life support (x182_1)

medic

Current Page: Adult advanced life support

Update

Page Name: Adult advanced life support

Page ID: x182_1

Page Description:

Adult advanced life support(x182_1)

Further considerations during CPR (1)*1*

CPR for 3 minutes (1 minute if immediately after defibrillation) (2)*1*

Pulseless electrical activity (3)*1*

Asystole (4)*1*

Further considerations during CPR (5)*1*

CPR for 1 minute (6)

Defibrillate up to 3 times as necessary (7)*1*

Non VT or VF (8)

VT or VF (9)

Assess rhythm & check pulse (10)

Attach defibrillator or monitor (11)

Manage vital signs (12)

Give precordial thump if

Edit Page

Save

Preview Saved Version

Page Codes: Add

SNOMED CT 312455006 I Del

References: Add

Figure 82

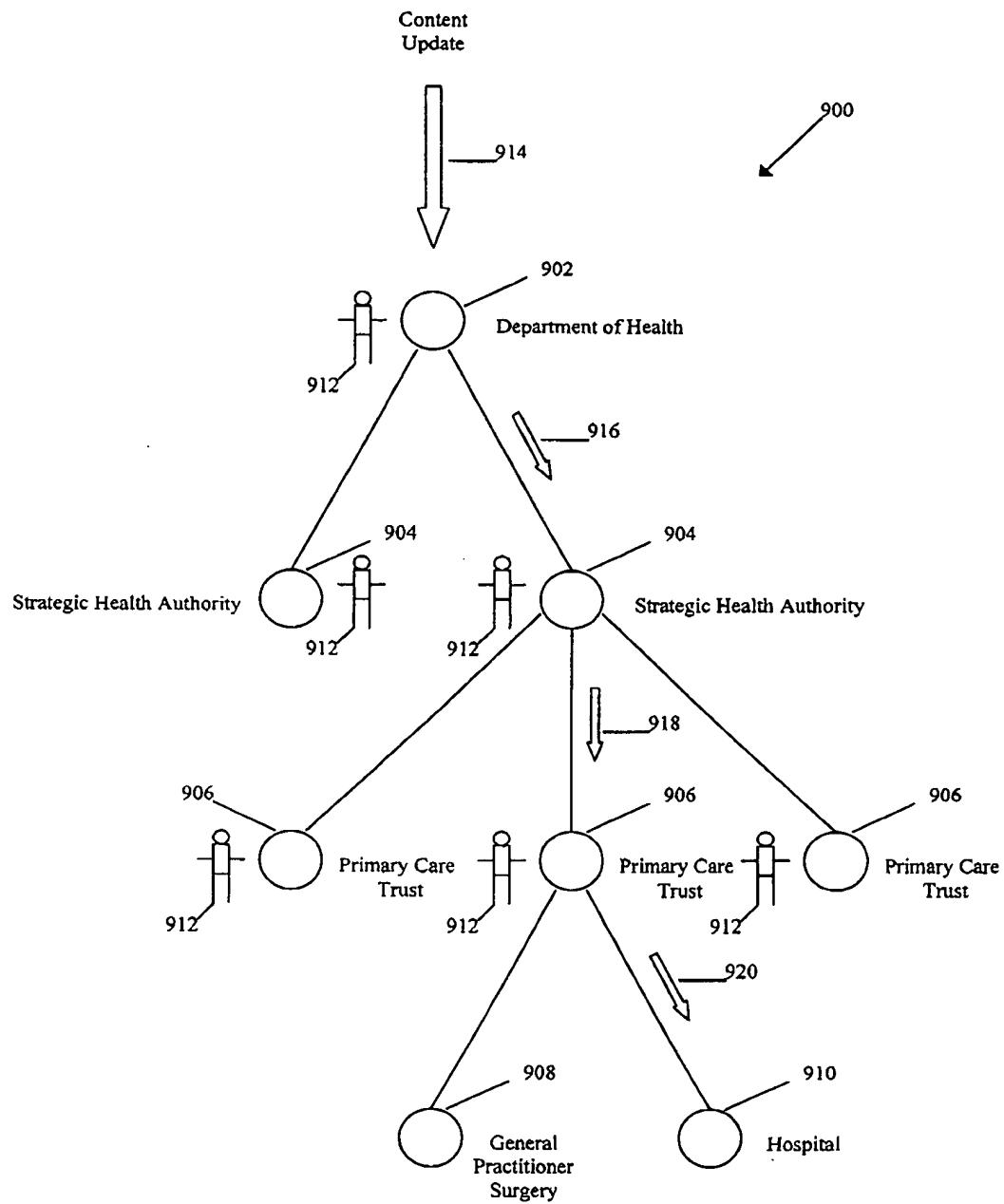


Figure 9

Figure 10

